



**COUNTY OF SAN DIEGO  
VOLUNTEER REPORT FORM  
PERIOD JULY 1, 2012 - JUNE 30, 2013  
Deadline: July 12, 2013**

COUNTY OF SAN DIEGO  
BOARD OF COUNTY RECORDS  
2013 JUL 26 AM 8 17

THOMAS J. JOZIA  
CLERK OF THE BOARD  
OF SUPERVISORS

**1. DEPARTMENT INFORMATION:**

Department: HHSA, BHS

Division/Unit: Adult/Older Adult System of Care Administration

**2. VOLUNTEER PROGRAM BENEFITS:**

a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc).

No. of Vol.	2	Hours	1,200	X	\$22.14	=	\$26,568.00
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Types of work performed by GENERAL VOLUNTEERS in this category:

The work performed by these two Social Work interns was consistent with Analyst I or II type of work. They performed system analysis and program development type of activities in support of their learning requirements for completion of their Masters of Social Work degrees.

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b. INSTITUTIONAL VOLUNTEERS (this section should include honor camp inmates, PIC/RETC, GAIN, etc.)

No. of Vol.		Hours		X	\$22.14	=	\$0.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

Not applicable.

c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level

<u>Position</u>	<u>Hours</u>	X	<u>VCL</u>	=	<u>Dollar Benefit</u>
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
No. of Vol.      Total Hours      0      Total Value =					\$0.00

Types of work performed by SPECIALIZED VOLUNTEERS in this category:  
Not applicable.

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>		<u>Hours</u>	<u>Dollar Benefit</u>			
2a.	<u>2</u>	<u>1,200</u>	<u>\$26,569.00</u>			
2b.	<u>                    </u>	<u>                    </u>	<u>                    </u>			
2c.	<u>                    </u>	<u>                    </u>	<u>                    </u>			
<b>Total Vol.</b>		<b>2</b>	<b>Hours</b>	<b>1,200</b>	<b>Total Value =</b>	<b>\$26,568.00</b>

### 3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____

TOTAL VALUE =	\$0.00
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### 4. VOLUNTEER PROGRAM COSTS:

a. Cost of supervision of volunteers (total hours of direct supervision multiplied by the hourly rate of staff person (s) directly supervising program volunteers.)

Hours	50	X	Rate	\$42.73	=	\$2,136.50
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b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours		X	Rate		=	
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c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

<u>Item</u>	<u>Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
TOTAL OF OTHER PROGRAM COSTS	= \$0.00

d. TOTAL OF VOLUNTEER PROGRAM COST (add 4a, 4b, and 4c)	=	\$2,136.50
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**5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:**

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)	<u>\$26,568.00</u>
b. Total of Donations to Volunteer Program, Item 3 (Page 2)	<u>\$0.00</u>
c. Subtract Total of Program Costs, Item 4d (Page 3)	<u>\$2,136.50</u>

**TOTAL PROGRAM BENEFIT**

**\$24,431.50**

**6. RECRUITING:**

Please describe your recruiting programs:

**7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:**

Please describe any special activities and/or achievements your program was involved in during the period of this report:

I have worked with local Schools of Social Work for the past 20+ years, making myself available as a field advisor for bachelor's and master's level social work interns. The schools contact me every year to ask if I will be available to supervise an intern. Most years, I have made myself available to accept an intern.

8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2013-14:**

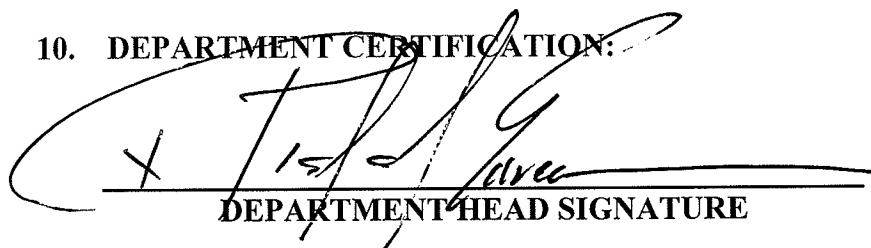
Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

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9. **GENERAL INFORMATION:**

Name of person completing report: Anna La Rocca Palid, LCSW, MH Prog. Coordinator  
Phone: 619-584-5009 Mail Stop: P-531-S E-Mail: anna.palid@sdcounty.ca  
Volunteer Coordinator: Anna La Rocca Palid, LCSW, MH Prog.  
Phone: 619-584-5009 Mail Stop: P-531-S E-Mail: anna.palid@sdcounty.ca

10. **DEPARTMENT CERTIFICATION:**

X   
DEPARTMENT HEAD SIGNATURE

X 7.24.2013  
DATE